

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	8/11/99
O.I.P.E. CLASSIFIER	<i>[Signature]</i>		8-16-99
FORMALITY REVIEW	<i>[Signature]</i>	71531	8-26-99 9-29-99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓ 1/22/02
2	✓ 5/14/02
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	✓
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31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
51	✓ 9/25/02
52	✓ 5/14/03
53	✓ 1/29/04
54	✓
55	✓
56	✓
57	✓
58	✓
59	✓
60	✓
61	✓
62	✓
63	✓
64	✓
65	✓
66	✓
67	✓
68	✓
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94	✓
95	✓
96	✓
97	✓
98	✓
99	✓
100	✓

Claim	Date
Final Original	
101	✓ 1/29/04
102	✓
103	✓
104	✓
105	✓
106	✓
107	✓
108	✓
109	✓
110	✓
111	✓
112	✓
113	✓
114	✓
115	✓
116	✓
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136	✓
137	✓
138	✓
139	✓
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142	✓
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145	✓
146	✓
147	✓
148	✓
149	✓
150	✓

If more than 150 claims or 10 actions
staple additional sheet here